

# Appeals Process

If you are found not eligible for Developmental Disability services, or believe that the Department of Health and Welfare or the Division of Medicaid has not treated you fairly, you can do the following:

- You can request a *Reconsideration of Decision* by returning the denial notice that is sent to you to a Central Office Care Manager.
- The Assessor and your Plan Developer will work together to make your plan meet your needs or bring it within your budget. If the Assessor and your Plan Developer cannot make your plan meet your needs or bring it within your budget, the Assessor will send it to the Regional Care Manager for an *Exception Review*.
- If the Regional Care Manager denies any services on your plan during the *Exception Review*, you can request another *Reconsideration of Decision* by a Central Office Care Manager.
- If the Central Office Care Manager upholds the decision to deny any of the services on your plan, you can request a *hearing*.
- Before the hearing stage, there might be an *Administrative Review* by a Division of Medicaid administrator.
- Also before the hearing stage, there might be a *pre-hearing* meeting with you, any representative you might need, Central Office Staff, and a Hearing Officer. The Hearing Officer will determine if your case needs to go to hearing.
- While you wait for the hearing, you can request that your services be extended until a determination is made. However, you might be required to pay back the money you receive for the services during this time, if the results of the hearing find that you are not eligible for those services.
- Once the hearing has taken place, the Hearing Officer makes the final decision.
- If you disagree with the Hearing Officer's decision, you can request a *Director Review*. The Director Review is the final step to have your concerns addressed.